

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MM</i>	<i>7891</i>	<i>6/2/00</i>
O.I.P.E. CLASSIFIER		<i>2/6/10/00</i>	
FORMALITY REVIEW		<i>6/4/07</i>	<i>8-8-00</i>
RESPONSE FORMALITY REVIEW		<i>6/4/07</i>	<i>8-30-00</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 □ ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	<i>11-3-00</i>
2	✓	✓	<i>11-3-00</i>
3	✓	✓	<i>11-3-00</i>
4	✓	✓	<i>11-3-00</i>
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Claim	Final	Original	Date
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150	✓	✓	<i>11-3-00</i>

If more than 150 claims or 10 actions  
staple additional sheet here

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